
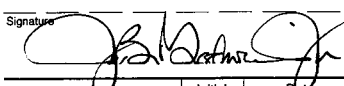


POSITION DESCRIPTION (Please Read Instructions on the Back)

| 2. Reason for Submission <input checked="" type="checkbox"/> Redescription <input type="checkbox"/> Reestablishment 3. Service <input type="checkbox"/> New <input type="checkbox"/> Hdqtrs. <input checked="" type="checkbox"/> Field 4. Employing Office Location Orlando, FL 5. Duty Station Orlando, FL | | | | | 1. Agency Position No. NL11921 6. OPM Certification No. 7. Fair Labor Standards Act <input checked="" type="checkbox"/> Exempt <input type="checkbox"/> Nonexempt 8. Financial Statements Required <input type="checkbox"/> Executive Personnel Financial Disclosure <input type="checkbox"/> Employment and Financial Interests 9. Subject to IA Action <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 10. Position Status <input checked="" type="checkbox"/> Competitive <input type="checkbox"/> Excepted (Specify in Remarks) SES (Gen.) <input type="checkbox"/> SES (CR) 11. Position is: <input type="checkbox"/> Supervisory <input type="checkbox"/> Managerial <input checked="" type="checkbox"/> Neither 12. Sensitivity <input checked="" type="checkbox"/> 1 - Non-Sensitive <input type="checkbox"/> 2 - Noncritical Sensitive <input type="checkbox"/> 3 - Critical Sensitive <input type="checkbox"/> 4 - Special Sensitive 13. Competitive Level Code 0965 14. Agency Use | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|------|----------|------|----------|--|--|----------|------|----------|------|----------|------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 15. Classified/Graded by a. U.S. Office of Personnel Management b. Department, Agency or Establishment c. Second Level Review d. First Level Review e. Recommended by Supervisor or Initiating Office 16. Organizational Title of Position (if different from official title) | | | | | Official Title of Position Pay Plan Occupational Code Grade Initials Date 17. Name of Employee (if vacant, specify) | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18. Department, Agency, or Establishment Department of the Army (DA) a. First Subdivision U.S. Army Materiel Command (AMC) b. Second Subdivision Simulation, Training and Instrumentation Command (STRICOM) | | | | | c. Third Subdivision Directorate for Resource Management (R) d. Fourth Subdivision Financial Management Division (RF) e. Fifth Subdivision Signature of Employee (optional) | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19. Employee review - This is an accurate description of the major duties and responsibilities of my position. 20. Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the knowledge that this information is to be used for statutory purposes relating to appointment and payment of public funds, and that false or misleading statements may constitute violations of such statutes or their implementing regulations. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| a. Typed Name and Title of Immediate Supervisor RICHARD C. GILMOUR, CHIEF, FINANCIAL MGT. DIV Signature:  Date: 6/27/00 | | | | | b. Typed Name and Title of Higher-Level Supervisor or Manager (optional) | | | | | | | | | | | | | | | | | | | | | | | | | |
| 21. Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards. Typed Name and Title of Official Taking Action JAMES B. GODWIN, COL, CHIEF OF STAFF Signature:  Date: 4/27/00 | | | | | 22. Position Classification Standards Used in Classifying/Grading Position USOPM PCS GS 0560, Budget Analysis Series, July 81 Information for Employees. The standards, and information on their application, are available in the personnel office. The classification of the position may be reviewed and corrected by the agency or the U.S. Office of Personnel Management. Information on classification/job grading appeals, and complaints on exemption from FLSA, is available from the personnel office or the U.S. Office of Personnel Management. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 23. Position Review a. Employee (optional) b. Supervisor c. Classifier | | | | | <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Initials</th> <th>Date</th> <th>Initials</th> <th>Date</th> <th>Initials</th> <th>Date</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> | | Initials | Date | Initials | Date | Initials | Date | | | | | | | | | | | | | | | | | | |
| Initials | Date | Initials | Date | Initials | Date | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 24. Remarks This position is a trainee position for full performance GS-560-11. BUS: 7777 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 25. Description of Major Duties and Responsibilities (See Attached) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

NON-CRITICAL ACQUISITION POSITION AMENDMENT TO PD# N4 11921

"The employee must meet DoD 5000.52-M requirements applicable to the duties of the position."